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S.D. SEC. OF STATE

STATE OF SOUTH DAKOTA
Statement of Legal Newspaper Ownership and Circulation

1. TITLE OF NEWSPAPER: Dell Rapids Tribune		2. DATE: 10-6-2017
3. FREQUENCY OF ISSUE: Weekly	3A. NO. OF ISSUES PUBLISHED ANNUALLY: 52	3B. ANNUAL SUBSCRIPTION PRICE $ 29.09 County 36.13 out of County
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers): 511 W 4th St. Dell Rapids, Minnehaha, SD 57022		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers): PO Box 5034 Sioux Falls SD 57117-5034		
6. FULL NAME OF PUBLISHER: Kathy Jack Romero PO Box 5034 Sioux Falls SD 57117		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given. FULL NAME: Gannett MHC Media, Inc. COMPLETE MAILING ADDRESS: 7950 Jones Branch Drive McLean, VA 22107		
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.: None		

9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run Plus Paid Electronic Copies)	1,661	1,693
B. PAID AND/OR REQUESTED CIRCULATION		
1. Sales through dealers and carriers, street vendors, and counter sales.	387	337
2. Mail Subscription (Paid and or requested)	276	270
3. Paid Electronic Copies	0	0
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1, 9B2 and 9B3.)	663	607
D. FREE DISTRIBUTION		
1. BY MAIL, CARRIER OR OTHER MEANS	83	50
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	0	0
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	746	657
F. COPIES NOT DISTRIBUTED		
1. Office use, left over, unaccounted, spoiled after printing	915	1,036
2. Return from News Agents		
G. TOTAL (Sum of E, F1 and F2 – Should equal total shown in A.)	1,661	1,693

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public

I swear that the statements made by me are true, correct, and complete:

(Signature)

Sr Regional Finance Director
(Title)

Sworn to before me this 10th day of Oct., 2017

State of South Dakota)
§
County of Minnehaha)

Betty Gates
Notary Public

(Seal)

BETTY GATES
NOTARY PUBLIC
SOUTH DAKOTA

My commission expires: 3/11/22